

**PART B - FEE(S) TRANSMITTAL**

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5514 7590 02/20/2009

**FITZPATRICK CELLA HARPER & SCINTO**  
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(Depositor's name)

(Signature)

(Date)

APPLICATION NO.	FILING DATE	FIRST NAMED INVENTOR	ATTORNEY DOCKET NO.	CONFIRMATION NO.
10/626,647	07/25/2003	Kaori Oki	03500.017432.	1415

TITLE OF INVENTION: Downloading of a control program corresponding to the type of the operating system

APPLN. TYPE	SMALL ENTITY	ISSUE FEE DUE	PUBLICATION FEE DUE	PREV. PAID ISSUE FEE	TOTAL FEE(S) DUE	DATE DUE
nonprovisional	NO	\$1510	\$300	\$0	\$1810	05/20/2009
EXAMINER	ART UNIT		CLASS-SUBCLASS			
POPOVICI, DOV	2625		358-001150			

1. Change of correspondence address or indication of "Fee Address" (37 CFR 1.363).	2. For printing on the patent front page, list (1) the names of up to 3 registered patent attorneys or agents OR, alternatively, (2) the name of a single firm (having as a member a registered attorney or agent) and the names of up to 2 registered patent attorneys or agents. If no name is listed, no name will be printed.	1. <u>Fitzpatrick, Cella, Harper &amp; Scinto</u> 2. _____ 3. _____
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**3. ASSIGNEE NAME AND RESIDENCE DATA TO BE PRINTED ON THE PATENT (print or type)**

PLEASE NOTE: Unless an assignee is identified below, no assignee data will appear on the patent. If an assignee is identified below, the document has been filed for recordation as set forth in 37 CFR 3.11. Completion of this form is NOT a substitute for filing an assignment.

(A) NAME OF ASSIGNEE

(B) RESIDENCE: (CITY and STATE OR COUNTRY)

CANON KABUSHIKI KAISHA

TOKYO, JAPAN

Please check the appropriate assignee category or categories (will not be printed on the patent):  Individual  Corporation or other private group entity  Government

4a. The following fee(s) are submitted:

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 Publication Fee (No small entity discount permitted)  
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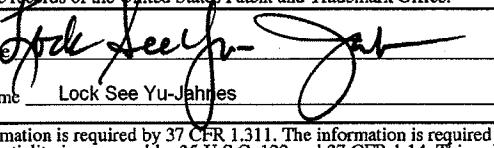
4b. Payment of Fee(s): (Please first reapply any previously paid issue fee shown above)

~~Lock See Yu-Jahne~~ Payment made concurrently herewith  
 Payment by credit card. Form PTO-2038 is attached.  
 The Director is hereby authorized to charge ~~Lock See Yu-Jahne~~ any deficiency, or credit any overpayment, to Deposit Account Number 06-1205 (enclose an extra copy of this form).

5. Change in Entity Status (from status indicated above)

a. Applicant claims SMALL ENTITY status. See 37 CFR 1.27.  b. Applicant is no longer claiming SMALL ENTITY status. See 37 CFR 1.27(g)(2).

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Authorized Signature 

Typed or printed name Lock See Yu-Jahne

Date May 6, 2009

Registration No. 38,667

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